



JRW CCS Region Rate Proposal Worksheet

[PRODUCTIVITY SHEET](#)

Name of Agency:

Calendar Year:

Professional Type:

Service Array Item:

Counties Willing to Serve:

Please fill in all orange cells.

Staff (Direct Service Positions)	Hourly Rate	Hours Worked/Week	Hours Per Year	Annual Salary	Annual Fringe	Staff Hours Allocated to Program Annually	Program Annual Salary & Fringe	Staff Hours Converted to FTE
			-	\$ -				
			-	\$ -				
			-	\$ -				
			-	\$ -				
			-	\$ -				
			-	\$ -				
			-	\$ -				
			-	\$ -				
			-	\$ -				
Totals	\$ -	-	-	\$ -	\$ -	-	\$ -	-

Other Direct Costs		NOTES:	
Please pro-rate these costs to capture time spent directly on the CCS program.	Program Clinical Supervision		
	Direct Service Administrator		
	Direct Allocated Support Staff		
	Training Costs		
	Travel Costs		
	Non-Staff Costs		
	Other (explain):		
Total Direct Costs		\$	-
General Overhead Costs			
Please pro-rate these costs using an allocation forumula for the CCS program.	AccountingFinancial		
	Billing		
	Human Resources		
	Legal		
	Plant/Building Maintenance		
	Support Staff		
	Agency Director		
	Software/IT		
	Lease and Rental		
	Utilities		
	Agency Administration		
Other (explain):			
Total General Overhead Costs		\$	-
All Total Costs		\$	-
Productivity Percentage		#DIV/0!	Percentage of time that is billable.
Productive Hours		#DIV/0!	Number of "billable" hours after subtracting the hours noted on the productivity page.
Hourly Rate		#DIV/0!	Total costs divided by your productive hours.